

Via Overnight Courier

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FEC MAIL CENTER

January 29, 2014

Federal Election Commission 999 E Street, N.W. Washington, DC 20463

Re:

Washington Dental Service Political Action Committee (C00532440)

January 31 2013 Year-End Report

Ladies and Gentlemen:

Enclosed please find the original and one copy to be conformed of the 2013 Year-End Report for the Washington Dental Service Political Action Committee. Please stamp the copy "Received" and send it back in the enclosed return envelope.

Please do not hesitate to call the undersigned at 206-528-2406 or via email at <u>jorenstein@deltadentalwa.com</u> if you have any questions.

Very truly yours,

Jene A Orenstein

Secretary

Washington Dental Service Political Action Committee

are a. Openstein

Encl.

4031171254

FE6AN026

FEC FORM 3X

REPORT OF RECEIPTS AND DISBURSEMENTS

For Other Than An Authorized Committee

RECEIVED

20 Office Use Only Example: If typing, type TYPE OR PRINT ▼ NAME OF 12FE4M5 COMMITTEE (in full) over the lines. MAIL CENTER | Washii ngtop, Dental promital, Serviticle, Politica, I, Actiop, Committee 9706 Fourth Ave. NE ADDRESS (number and street) Check if different than previously W A | S, e, a, t, t, l | 9, 8, 1, 1, 5 | - | 2, 1 reported. (ACC) CITY A STATE A ZIP CODE A FEC IDENTIFICATION NUMBER ▼ 3. IS THIS **NEW AMENDED** 0532440 0 N REPORT (N) OR (A) 4. TYPE OF REPORT (b) Monthly Nov 20 (M11) Feb 20 (M2) May 20 (M5) Aug 20 (M8) (Non-Election Report (Choose One) Year Only) Due On: Dec 20 (M12) Mar 20 (M3) Jun 20 (M6) Sep 20 (M9) (Non-Election Year Only) (a) Quarterly Reparts: Apr 20 (M4) Jul 20 (M7) Jan 31 (YE) Oct 20 (M10) April 15 Quarterly Report (Q1) (c) 12-Day Primary (12P) General (12G) Runoff (12R) July 15 **PRE-Election** Quarterly Report (Q2) Report for the: Convention (12C) Special (12S) October 15 Quarterly Report (Q3) in the January 31 Election on State of Year-End Report (YE) July 31 Mid-Year 30-Day (d) Report (Non-election **POST-Election** General (30G) Runoff (30R) Special (30S) Year Only) (MY) Report for the: Termination Report in the (TER) Election on State of Covering Period through I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete. Sean P. Pickard Type or Print Name of Treasurer Date Signature of Treasurer

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

| | Office | j |] | l | ı | FEC FORM 3X |
|---------|--------|---|---|---|---|--------------|
| 1 | Use | İ | ì | | ı | Rev. 12/2004 |
| <u></u> | Only | | | | |] |

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Washington Dental Service Political Action Committee Report Covering the Period: From: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2013 January 1, (b) Cash on Hand at 3 5 0 0 . 0 7 Beginning of Reporting Period...... (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B)..... 5 0 0 0 0 0 500.00 Total Disbursements (from Line 31)..... Cash on Hand at Close of 8. Reporting Period 21700.52 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)

 Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D).....

0

This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission 999 E Street, NW Washington, DC 20463

Toll Free 800-424-9530 Local 202-694-1100

FE6AN026

14031171256

DETAILED SUMMARY PAGE

of Receipts

Page 3

FEC Form 3X (Rev. 06/2004)

Write or Type Committee Name
Washington Dental Service Political Action Committee

| _ | Washington Dental Service Political Action Committee | | | | | | |
|-----|---|------|--|-----|--|--|--|
| Re | eport Covering the Period: From: | 7 61 | 2 0 1 3 | To: | 12 / 31 / 2013 | | |
| - | I. Receipts | | COLUMN A otal This Period | | COLUMN B Calendar Year-to-Date | | |
| 11. | Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees (i) Itemized (use Schedule A) | | 18700.00 | | 2 2 7 0 0 0 0 | | |
| | (ii) Unitemized (iii) TOTAL (add Lines 11(a)(i) and (ii)▶ | | | | | | |
| | (b) Political Party Committees | | and the second s | | | | |
| 12. | 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5) Transfers From Affiliated/Other Party Committees | | 18700.00 | | 22700.00 | | |
| 13. | All Loans Received | | leesel 22 and 20 | | | | |
| | Loan Repayments Received Offsets To Operating Expenditures (Refunds, Rebates, etc.) | | | | and the second | | |
| 16. | (Carry Totals to Line 37, page 5) Refunds of Contributions Made to Federal Candidates and Other | | | | | | |
| 17. | Political Committees Other Federal Receipts (Dividends, Interest, etc.) | | .45 | | . 5 2 | | |
| 18. | Transfers from Non-Federal and Levin Funds (a) Non-Federal Account (from Schedule H3) | | | | | | |
| | (b) Levin Funds (from Schedule H5) | | | | | | |
| | (c) Total Transfers (add 18(a) and 18(b)) | | Bases New at Base Vice and Base Annual December of the second | | | | |
| 19. | Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))▶ | | 18700.45 | | 2 2 7 0 0 5 2 | | |
| 20. | Total Federal Receipts (subtract Line 18(c) from Line 19)▶ | | 18700.45 | | 2°2°7°0°0°52 | | |

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

| II. Disbursements | COLUMN A | COLUMN B |
|---|---|--|
| Operating Expenditures: - | Total This Period | Calendar Year-to-Date |
| (a) Allocated Federal/Non-Federal Activity (from Schedule H4) | | |
| (i) Federal Share | | |
| (·, | | |
| (ii) Non-Federal Share | | |
| (b) Other Federal Operating | | |
| Expenditures | | |
| (c) Total Operating Expenditures | | |
| (add 21(a)(i), (a)(ii), and (b)) | | |
| 2. Transfers to Affiliated/Other Party Committees | | |
| 3. Contributions to | | |
| Federal Candidates/Committees and Other Political Committees | 5 0 0 . 0 0 | 1 0 0 0.00 |
| 4. Independent Expenditures | | |
| (use Schedule E)5. Coordinated Party Expenditures | | |
| 5. Coordinated Party Expenditures (2 U.S.C. §441a(d)) | | |
| (2 U.S.C. §441a(d)) (use Schedule F) | | |
| | | |
| 6. Loan Repayments Made | | |
| 7. Loans Made | | |
| 8. Refunds of Contributions To: | | |
| (a) Individuals/Persons Other Than Political Committees | | |
| | | |
| (b) Political Party Committees | | |
| (c) Other Political Committees | | |
| (such as PACs) | | lands and make the same the sa |
| (d) Total Contribution Refunds | | |
| (add Lines 28(a), (b), and (c))▶ | | |
| | | |
| 9. Other Disbursements | | |
| 0. Federal Election Activity (2 U.S.C. §431(20)) | | |
| (a) Allocated Federal Election Activity | | |
| (from Schedule H6) | | |
| (i) Federal Share | | |
| | | |
| (ii) "Levin" Share | | |
| (b) Federal Election Activity Pald Entirely | | |
| With Federal Funds | | |
| (c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b)) | | |
| Elites obtain, sotaltil and sotali | | Constitution of Description of Ton American Management |
| 1. Total Disbursements (add Lines 21(c), 22, | | |
| 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) | 5,0,0,00 | 1 0 0 0 0 0 0 |
| | www.com.com.com.com.com.com.com.com.com.com | lander de la company de la com |
| 2. Total Federal Disbursements | | |
| (subtract Line 21(a)(ii) and Line 30(a)(ii) | 5 0 0.0 0 | |
| from Line 31) | 5 0 0 0 0 | 1000.00 |
| | | |

(subtract Line 37 from Line 36)

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003) Page 5 COLUMN A III. Net Contributions/Operating Ex-COLUMN B **Total This Period** Calendar Year-to-Date penditures 33. Total Contributions (other than loans) 7 0 0 . 0 0 00.00 (from Line 11(d), page 3) 34. Total Contribution Refunds (from Line 28(d))..... 35. Net Contributions (other than loans) (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures (from Line 15, page 3)..... 38. Net Operating Expenditures

| SCHEDULE A | (FEC | Form | 3X) |
|--------------|--------------|------|-----|
| ITEMIZED REC | EIPTS | } | |

| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE OF | | | |
|--------------------------|--|--|---|--|--|--|
| ITEMIZED RECEIPTS | | for each category of the Detailed Summary Page | (check only one) 11a 11b 11c 12 13 14 15 16 | | | |
| Any i | nformation copied from such Reports and S | Statements ma | ay not be sold or used by any pe | erson for the purpose of soliciting contributions et to solicit centributions from such committee. | | |
| <u> </u> | AME OF COMMITTEE (In Full) | | | | | |
| / v | Vashington Dental Ser v ice Politic | al Action (| Committee | | | |
| A. St | ıll Name (Last, First, Middle Initial) red, Kristin | | | Date of Receipt | | |
| _1 | ailing Address 001 Fourth Ave. Ste. 4400 | Otata | 7io Code | 0 7 0 4 2 0 1 3 | | |
| UI | v Seattle | State WA | Zip Code 98154 | Amount of Each Receipt this Period | | |
| | EC ID gamber of contributing deral political committee. | | | 1 0 0 0 0 0 0 | | |
| _ F | ame of Employer Houser Martin Morris | Occupation Recruite | er | | | |
| _ | eceipt For: ☐ Primery ☐ General Other (specify) ▼ | | Year-to-Date ▼ 1 0 0 0 . 0 0 | | | |
| B. D | ıll Name (Last, First, Middle Initial) wyer, James D. | Date of Receipt | | | | |
| | ailing Address 706 Fourth Ave. NE | State | 7in Codo | 10'30'2013 | | |
| 3 | eattle | State WA | 7ip Code 98 i 15 | Amount of Each Receipt this Period | | |
| | EC ID number of contributing deral political committee. | C . | | 2, 0, 0, 0, 0, 0 | | |
| Na I | ame of Employer Delta Dental of Washington | Occupation CEO | | | | |
| _ | eceipt For: X Primary General | Aggregate | Year-to-Date ▼ | | | |
| Į. | Other (specify) Ψ | | 3 0 0 0 0 0 0 | | | |
| c. L | ull Name (Last, First, Middle Initial) .o, Eric C. | | | Date of Receipt | | |
| _ | ailing Address 4734th Ave. NE | | | 11 ' 0 5 ' 2 0 1 3 | | |
| S | eattle | State WA | Zip Code 98115 | Amount of Each Receipt this Period | | |
| | EC ID number of contributing deral political committee. | C. | | 5 0 0 0 0 0 0 | | |
|] | Name of Employer Delta Dental of Washington Occupation VP, 🛭 nd | | erwriting | | | |
| - | eceipt For: X Primary General Caner (specify) | Aggregate | Year-to-Date ▼60_0_0,0_0 | Granasa. | | |
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| SCHEDULE A (FEC Form 3X) | | Use separate schedule(s) | FOR LINE NUMBER: PAGE OF (check only one) | | | |
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| ITEMIZED RECEIPTS | | for each category of the Detailed Summary Page | Ina 11b 11c 12 | | | |
| | | | 13 14 15 16 17 | | | |
| Ar | y information copied from such Reports and State for commercial purposes, other than using the na | son for the purpose of soliciting contributions to solicit centributions from such committee. | | | | |
| 1 | NAME OF COMMITTEE (In Full) | | | | | |
| 2 | Washington Dental Service Political | Action Committee | | | | |
| A. | Full Name (Last, First, Middle Initial) Merlo, Kristin A | | Date of Receipt | | | |
| | Mailing Address 7875 81st PI SE | | | | | |
| | City Mercer Island | State Zip Code WA 98040 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | C | 5 0 0 0 . 0 0 | | | |
| | Delta Dental of Washington | Occupation P, Sales & Marketing | | | | |
| | X Primary General | Aggregate Year-to-Date ▼ | | | | |
| | Other (specify) | 5000.00 | | | | |
| В. | Full Name (Last, First, Middle Initial) Webber, Susan | · · · · · · · · · · · · · · · · · · · | Date of Receipt | | | |
| | Mailing Address 4513 191st PL NE City | State Zip Code | 11 11 2 0 1 3 | | | |
| | Sammamish | WA 98074 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | C | 5_0_0_0.0.00 | | | |
| | | Occupation Chief HR Officer | | | | |
| | Receipt For: X Primary General Genera | Aggregate Year-to-Date ▼ | | | | |
| | Other (specify) | 540.0.000 | | | | |
| <u>с.</u> | Full Name (Last, First, Middle Initial) Harwell, Janis L | | Date of Receipt | | | |
| | Mailing Address 2600 Second Ave. #207 | | 12 16 2013 | | | |
| | City Seattle | State Zip Code WA 98121 | Amount of Each Receipt this Period | | | |
| | FEC ID number of contributing federal political committee. | C | 2 0 0.0 0 | | | |
| | | Occupation Board Member | | | | |
| | Receipt For: X Primary General Other (specify) ▼ | Aggregate Year-to-Date ▼ 2 0 0.0 0 | | | | |
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| SCHEDULE A | (FEC | Form | 3X) |
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| ITEMIZED REC | EIPTS | } | |

FOR LINE NUMBER: **PAGE** OF Use separate schedule(s) (check only one) for each category of the 11a 11b 11c 12 Detailed Summary Page. 13 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than uning the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Washington Political Action Committee Full Name (Last; First, Middle Initial) Tune, J. F. Date of Receipt Mailing Address 1188 Harvard Ave. E Suite 3 City Seattle Amount of Each Receipt this Period FEC ID number of contributing 5 0 0,000 federal political committee. Name of Employer Occupation Board Member Receipt For: Aggregate Year-to-Date ▼ **Primary** General 0 0. 0 0 Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt **Mailing Address** City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ **Primary** General Other (specify) Full Name (Last, First, Middle Initial) Date of Receipt Mailing Address City Zip Code State Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Name of Employer Occupation Receipt For: Aggregate Year-to-Date ▼ Primary General Cliner (specify) ▼ SUBTOTAL of Receipts This Page (optional)..... TOTAL This Period (last page this line number only).....

SCHEDULE B (FEC Form 3X)

| SCHEDULE B (FEC Form 3X) | | FOR LINE NUMBER: PAGE OF | | | |
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| TEMIZED DISBURSEMENTS | Use separate schedule(s) for each category of the | (CITCCK OILL) | | | |
| | Detailed Summary Page | 21b | 22 23 28a 28b | $\begin{array}{ c c c c c c c c c c c c c c c c c c c$ | |
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| or for ammercial purposes, other than using the na | | | | | |
| NAME OF COMMITTEE (In Full) | | | | | |
| / Washington Dental Service Political | Action Committee | | | | |
| Full Name (Last, First, Middle Initial) | | | Date of Disburser | mont | |
| Denny Heck for Congress | | | MTH / DT | | |
| Mailing Address Post Office Box #235 | | | 1.0 2 | 9 2 0 1 3 | |
| ^{City} Olympia | State Zip Code WA 98507 | | | | |
| Pursose of Disbursement Contribution | | | Amount of Each I | Disbursement this Period | |
| Candidate Name | | Category/ | | 5 0 0 0 0 | |
| Denny Heck | | Type | | 5 0 0.0 0 | |
| | ment For: | | | | |
| Senate X President | Primary General Other (specify) ▼ | | | | |
| State: District: | Galler (opcolity) | | | | |
| Full Name (Last, First, Middle Initial) | | | | | |
| B | | | Date of Disburser | ment | |
| Mailing Address | | | W W W / D W | 7 7 8 7 8 7 8 7 | |
| City | State Zip Code | | | · | |
| Burness of Dishurnerson | | | | | |
| Purpose of Disbursement | | | Amount of Each | Disbursement this Period | |
| Candidate Name | | Category/ Type | | 70-3-4-5 | |
| Office Sought: House Disburse | ement For: | | · | | |
| Senate | Primary General | | | | |
| State: District: | Other (specify) | | • | | |
| Full Name (Last, First, Middle Initial) | - " " | | | | |
| C. (1) | · . | | Date of Disburse | ment | |
| Mailing Address | | | | | |
| City | State Zip Code | | | | |
| Purpose of Disbursement | | | | | |
| Candidate Name | | Category/ Type | Amount of Each | Disbursement this Period | |
| | ment For: | —————————————————————————————————————— | General Summer States C. T. Samuelles | | |
| Senate President | Primary ☐ General Other (specify) ▼ | | | | |
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| SUBTOTAL of Disbursements This Page (optional). | | ·····• | | | |
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Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS The FEC added this page to the end of this filing to indicate how if was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified Postmarked **USPS Priority Mail Postmarked USPS Priority Mail Express** Postmark Illegible No Postmark **Shipping Date** UPS Overnight Delivery Service (Specify): 1/29/14 Next Business Day Delivery Date of Receipt Received from House Records & Registration Office Date of Receipt Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify): **PREPARER** DATE PREPARED

(8/2013)